

CLAIMS ONLY

SERIAL NO. _____ FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
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23						
24						
25						
26						
27	1					
28	1					
29	/					
30	1					
31	/					
32	/					
33	/					
34	/					
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48						
49						
50						
TOTAL IND.	✓					
TOTAL DEP.	✓	◀	◀	◀	◀	
TOTAL CLAIMS		██████████	██████████	██████████	██████████	██████████

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS